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PTO/SB/21 (08-00)

TRANSMITTAL FORM

(to be used for all correspondence after initial)

Total Number of Pages in This Submission

Application Number 09/995,885

Filing Date 11/28/2001

First Named Inventor Cho

Group Art Unit 1725

Examiner Name

Attorney Docket Number MOC-100X01

ENCLOSURES (check all that apply)

- ☐ Fee Transmittal Form
 - ☐ Fee Attached
- ☐ Amendment/Reply
 - ☐ After Final
 - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/Incomplete Application
 - ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☒ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please identify below):

Request for Withdrawal as Attorney or Agent

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

Jeff Lloyd

Signature

Date

11 June 2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Honorable Commissioner for Patents & Trademarks, Washington, DC 20231, Attn: Bd. Of Patent Appeals and Interferences on June 10, 2002.

Typed or printed name Jeff Lloyd

Signature

Date

11 June 2002

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PTO/SB/83 (03-02)

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Applicati n Number	09/995,885
Filing Dat	11/28/2001
First Named Inventor	Cho
Group Art Unit	1725
Examiner Name	
Attorney Docket Number	MOC-100XC1

To: Assistant Commissioner for Patents
Washington, DC 20231

I hereby apply to withdraw as attorney or agent for the above-identified patent application.

The reasons for this request are:

Applicant has failed to pay the Attorneys of record for services rendered despite numerous requests resulting in a financial burden on the Attorneys. Applicant was notified by mail on April 26, 2002 of Attorneys' intent to withdraw. Additionally phone calls regarding intent to withdraw were made to the Applicant on May 17, 2002, May 24, 2002 and May 31, 2002. Despite Applicant's repeated assurances that a check would be sent, no payment was ever made. The Applicant's company phone and fax numbers have been disconnected. Continuing representation will result in economic loss to Attorneys. There are no outstanding actions in this application. Accordingly, Applicant will have sufficient time to obtain other representation. M.P.E.P 402.06.

- ☐ The correspondence address is NOT affected by this withdrawal.
- ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

☐ Customer Number

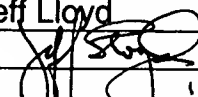
Place Customer Number
Bar Code Label Here

OR

Firm or <input checked="" type="checkbox"/> Individual Name	Heung Ki Cho				
Address	Morpho Corporation				
Address	1255 Belle Avenue				
City	Winter Springs	State	FL	ZIP	32708
Country	U.S.				
Telephone	(407) 696-7979	Fax	(407) 696-7996		

- ☒ This request is made on behalf of myself and
☐ all the attorneys/agents of record,
☐ the attorneys/agents (with registrations numbers) listed on the attached paper(s), or
☒ the attorneys/agents associated with Customer Number 23.557

This request is enclosed in triplicate (including any attachments).

Name	Jeff Lloyd
Signature	
Date	11 June 2002

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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